

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.P.E. CLASSIFIER		19	12301
FORMALITY REVIEW	MT	523	09/07/01
RESPONSE FORMALITY REVIEW	07/07	780	6-5-0

INDEX OF CLAIMS

✓ ----- Rejected N ----- Non-elected
 o ----- Allowed I ----- Interference
 - (Through numeral) ... Canceled A ----- Appeal
 + ----- Restricted O ----- Objected

Claim	Date	Final	Original
1	5-21-0		
2	5-21-0		
3	5-21-0		
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Claim	Date	Final	Original
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Claim	Date	Final	Original
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If more than 150 claims or 10 actions
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